



Department of Mathematics
Quaid-i-Azam University, Islamabad
Application Form

I _____ S/D/O _____ Student of M.Phil./ Ph.D. _____,
 Semester _____ Registration No _____ Department **Mathematics** hereby request to kindly
 approve the following:

Change of Topic	Change of Supervisor	Appointment of Co-Supervisor	Change of Co-Supervisor	Cancellation of Admission
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Details are mentioned as under:

current Topic

New Topic

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Approved by AS&RB

on: _____

Current Supervisor

New Supervisor

.....

.....

Supervisor Approved on: _____

Current Co- Supervisor

New Co- Supervisor

.....

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Justification: _____

Reasons for Cancellation of Admission:

_____ **Applicant Signature**

Remarks of Supervisor: _____

Signature of Supervisor

Recommendations of Chairperson:

Signature of Chairperson

Remarks of Dean: _____

Signature of Dean

Registrar

Quaid-i-Azam University
Department of Mathematics

- 1) Name of Student: _____
- 2) Programme of Study (MPhil or PhD): _____
- 3) Date of Joining: _____
- 4) Date of Admission approved by AS&RB: _____
- 5) Date of approval of Supervisor by AS&RB: _____
- 6) Date of approval of title of thesis/synopsis: _____
- 7) Date of approval of change of Title (if any): _____
- 8) Date of extension approval (if any): _____

Quaid-i-Azam University
Department of Mathematics

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